

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

| Claim | Date | Claim | Date | Claim | Date |
|-------------------|------|-------------------|------|-------------------|------|
| Final Original | | Final Original | | Final Original | |
| 1 | | 51 | | 101 | |
| 2 | | 52 | | 102 | |
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If more than 150 claims or 10 actions
 staple additional sheet here

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